

Type or print clearly in black ink. The decision by the Kentucky Heritage Council with respect to certification is made on the basis of the descriptions in this application form. In the event of any discrepancy between the application form and other, supplementary material submitted with it (such as architectural plans, drawings, and specifications), the application form shall take precedence. A copy of this form will be provided to the Kentucky Department of Revenue. This form must be received by the Kentucky Heritage Council no later than *January 30* of the year the taxpayer intends to claim the credit.

1. Name of Property:

Street:

City: State: Zip:

2. Data on Rehabilitation Project

Project Start Date: Project Completion Date

Costs attributed solely to the rehabilitation of the history building \$

☐ Owner -occupied residential property (eligible for 30% KY Tax Credit)

☐ Commercial Property/Other (eligible for 20% KY Tax Credit)

NOTE: Owner-occupied residential property means a building or portion thereof, condominium or cooperative occupied by the owner as his/her principle residence.

3. Data on Ownership and Request for Certification:

I hereby apply for certification of rehabilitation work described above for purposes of the State tax incentives. I declare under penalty of law that the information provided is, to the best of my knowledge, correct, and that in my opinion the completed rehabilitation meets the Secretary’s “Standards for Rehabilitation” and is consistent with the work described in Part 2 of the Historic Preservation Certification Application.

Name:

(If there is more than one owner, attach full list of all owners with addresses, social security numbers or taxpayer identification numbers).

Organization:

(If this is a pass-through organization, such as a limited partnership, S Corporation or Limited Liability Company, attach full list of all owners).

Street:

City: State: Zip:

Social Security or Taxpayer Identification Number:

Telephone Number: E-Mail Address:

I attest that I have, or am the authorized representative of an entity that has, a possessory interest in the property.

SIGNATURE DATE

NOTE: For 2005, the total credit amount approved for a calendar year for all taxpayers is limited to \$3 million. If that limit is exceeded by approved projects, an apportionment formula will be applied to determine the credit amount awarded per protect and will result in a reduction. Taxpayers and the Kentucky Department of Revenue will be notified of approved credits no later than March 30.

KHC Office Use Only

The Kentucky Heritage Council has reviewed this application and the Part 2 - Description of Rehabilitation for this project and has determined:

☐ That the completed rehabilitation meets the Secretary of the Interior’s Standards for Rehabilitation. Effective on the date indicated below, the rehabilitation of this “Certified Historic Structure” is hereby designated a “Certified Rehabilitation. This letter of certification is to be used in conjunction with appropriate Kentucky Income Tax forms.

☐ That the completed rehabilitation does not meet with the Secretary of the Interior’s Standards for Rehabilitation and this project as submitted is not eligible for a Kentucky Historic Preservation Tax Credit.

Total Amount of Eligible Expenses Reported for this Project	
Total Amount of Eligible Expenses Reported for all Kentucky Projects in this year	
Total Approved Credit Amount for the Project	